

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No 1215 0188  
Expires 11 30 2006

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <u>9218</u>	2 Fiscal Year Covered From <u>1</u> / <u>1</u> / <u>001</u> Through <u>12</u> / <u>31</u> / <u>2004</u>
3 Name and address of person filing Name <u>JOSEPH A LANGELO</u> P.O. Box Bldg Room No. if any _____ Street <u>300 SOUTH GRAND ST - VD</u> City <u>ST LOUIS</u> State <u>MO</u> <u>63103</u> ZIP Code + 4 <u>9448</u>	4 Name, file number, and address of labor organization Name <u>UFO LOCAL 88</u> Labor Organization File Number <u>037945</u> P.O. Box Building and Room Number if any _____ Street <u>300 SOUTH GRAND BLVD</u> City <u>ST LOUIS</u> State <u>MO</u> <u>63103</u> ZIP Code + 4 <u>9448</u>
5 Position in labor organization <u>PRELIMINARY</u>	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name, if any) Name _____ Trade Name, if any _____ P.O. Box Bldg Room No. if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7 a Nature of Interest Transaction or Income _____  7 b Amount _____

Signature

15 Signature and verification The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

Joseph A. Langel

On

6/27/03  
Date

314-525-7615  
Telephone Number

Name of Person Filing

JOSEPH A LENGVEL

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name SPECIOR AND WELLS LLC

Trade Name if any

P O Box Bldg Room No if any

Street 206 WEST ARCADE

City FIRMWOOD

State MO 63122 ZIP Code + 4

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

11 a Nature of such dealing

LEGAL SERVICES

11 b Approximate dollar value of such dealing

\$50,000

12 a Nature of interest held or income received

CHRISTMAS GIFT

12 b Amount

\$50

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing

Joe Leary

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name MILLIMAN INTERNATIONAL

Trade Name if any

P O Box Bldg Room No if any

Street 501 NORTH BROADWAY

City ST LOUIS

State MO 63102

ZIP Code + 4

## 9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name LOCAL 88 PENSION &amp; TRUST FUND

Trade Name if any

P O Box Bldg Room No if any

Street 4260 SWORGLINE DR SUITE 170

City EARTH CITY

State MO 63045

ZIP Code + 4

## 11 a Nature of such dealing

CONSULTANT

## 11 b Approximate dollar value of such dealing

## 12 a Nature of interest held or income received

BASEBALL TICKETS

## 12 b Amount

\$200.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State

ZIP Code + 4

## 14 a Nature of payment

13 b Is the Business an Employer ☐or Consultant ☐

?

## 14 b Amount of payment

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